

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

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SDNY PRO SE OFFICE
2015 NOV 10 AM 10:02

Shogfile Dinkins

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

Detective Albert Brust Shield # 1001

Detective Anthony Barber Shield # 64

SBS Richa Erickson

NYPD / 88th Precinct

COMPLAINT

under the

Civil Rights Act, 42 U.S.C. § 1983
(Prisoner Complaint)

Jury Trial: ☒ Yes ☐ No
(check one)

15CV8847

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

I. Parties in this complaint:

- A. List your name, identification number, and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Shogfile Dinkins
ID # 14-A-5546
Current Institution Upstate Correctional Facility
Address 309 Bare Hill Road, P.O. Box 2001
Malone, N.Y. 12953

- B. List all defendants' names, positions, places of employment, and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name Albert Brust Shield # 2002
 Where Currently Employed NYPD Precinct #88
 Address 298 Classon Avenue
Brooklyn, N.Y. 11205

Defendant No. 2 Name Anthony Barber Shield # 64
 Where Currently Employed NYPD Precinct #88
 Address 298 Classon Avenue
Brooklyn, N.Y. 11205

Defendant No. 3 Name Richa Erickson Shield # N/A
 Where Currently Employed ~~298 Classon Avenue~~ ^{3D} NYPD Precinct #88
 Address 298 Classon Avenue
Brooklyn, N.Y. 11205

Defendant No. 4 Name NYPD Headquarters Shield # N/A
 Where Currently Employed NYPD
 Address 1 Police Plaza
New York, New York

Defendant No. 5 Name 88th Precinct Shield # N/A
 Where Currently Employed NYPD Precinct #88
 Address 298 Classon Avenue
Brooklyn, N.Y. 11205

II. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. In what institution did the events giving rise to your claim(s) occur? NYPD Precinct #88
- B. Where in the institution did the events giving rise to your claim(s) occur? ^{3D} ~~the inst~~
Outside of the "Interrogation" room.
- C. What date and approximate time did the events giving rise to your claim(s) occur? 5-29-14
at approx 7:30 pm

D. Facts: On 5-29-14, Detectives, Albert Brust and Anthony Barbare had me outside of the interrogation room at a desk looking at a video that was placed on "Facebook" of the "Assault". I was being charged with. I identified myself in the video as ~~me~~ just watching a "Girl Fight".

What happened to you?

Both Detectives told me even tho I didn't do anything, that I was still being charged with the crime because, no one else was arrested for it, later on down the line I was placed in an illegal line-up. (The line-up was invalid, because none of the "fillers" ~~didn't~~ resemble me, not even a little bit).

Who did what?

The "SAs" Rick Erickson was not present, but was involved because he/she, gave the Detectives the "OK" to charge me, and put me through the system for the assault. The case was later dismissed. On or about 11-25-14

Was anyone else involved?

In result to this matter, it is "False Arrest, unlawful imprisonment, Malicious Prosecution, Malicious Abuse of Process, and intentional infliction of emotional distress. I

Who else saw what happened?

III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. I sustained Cruel and Inhumane Treatment and Mental/Emotional Distress. In result of above matter. I was also placed on psych meds for "Sleep" and "Depression".

IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A. Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?

Yes ___ No ☒ present

If YES, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).

B. Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?

Yes _____ No ☒ Do Not Know _____

C. Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?

Yes _____ No ☒ Do Not Know _____

If YES, which claim(s)? _____

D. Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?

Yes _____ No ☒

If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes _____ No ☒

E. If you did file a grievance, about the events described in this complaint, where did you file the grievance?

1. Which claim(s) in this complaint did you grieve? _____

2. What was the result, if any? _____

3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process. _____

F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here: Because
I was in the present

2. If you did not file a grievance but informed any officials of your claim, state who you informed, when and how, and their response, if any: I informed my Attorney
before arraignment in Kings County Criminal Court.

G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.

V. Relief:

State what you want the Court to do for you (including the amount of monetary compensation, if any, that you are seeking and the basis for such amount). 500,000.00

On
these
claims

VI. Previous lawsuits:

A. Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes ___ No ☒

B. If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff _____

Defendants _____

2. Court (if federal court, name the district; if state court, name the county) _____

3. Docket or Index number _____

4. Name of Judge assigned to your case _____

5. Approximate date of filing lawsuit _____

6. Is the case still pending? Yes ___ No ___

If NO, give the approximate date of disposition _____

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) _____

On
other
claims

C. Have you filed other lawsuits in state or federal court otherwise relating to your imprisonment?

Yes ☒ No ___

D. If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)

1. Parties to the previous lawsuit:

Plaintiff Shirley Dinkins

Defendants C.O. Munoz Sheriff # 10864

2. Court (if federal court, name the district; if state court, name the county) New York County, United States District Court Southern District of New York

3. Docket or Index number 15-CV-3218

4. Name of Judge assigned to your case Gregory M. Woods

5. Approximate date of filing lawsuit April 21, 2014

6. Is the case still pending? Yes ___ No ☒

If NO, give the approximate date of disposition 9-27-15

7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?) Settled outside of court

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 4 day of November, 2015.

Signature of Plaintiff Shagunle Dinkins
Inmate Number 14-A-5546
Institution Address Upstate Correctional Facility
309 Bare Hill Road
P.O. Box 8001
Malone, New York, 12953

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide their inmate numbers and addresses.

I declare under penalty of perjury that on this 4 day of November, 2015, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: Shagunle Dinkins

AO 440 (Rev. 8/01) Summons in a Civil Action

UNITED STATES DISTRICT COURT

District of

SUMMONS IN A CIVIL CASE

V.

CASE NUMBER:

TO: (Name and address of Defendant)

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

an answer to the complaint which is served on you with this summons, within _____ days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

CLERK

DATE

(By) DEPUTY CLERK

JS 44C/SDNY
REV. 12/2005

CIVIL COVER SHEET

The JS-44 civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for use of the Clerk of Court for the purpose of initiating the civil docket sheet.

Shogunfile Dinkos

PLAINTIFFS

DEFENDANTS

ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)

ATTORNEYS (IF KNOWN)

42 U.S.C. 1983, Civil Rights Action.

CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE)

Has this or a similar case been previously filed in SDNY at any time? No ☐ Yes? ☒ Judge Previously Assigned Gregory H. WoodsIf yes, was this case Vol ☐ Invol. ☐ Dismissed. No ☐ Yes ☐ If yes, give date & Case No. 15-Cv-3218

(PLACE AN [X] IN ONE BOX ONLY)

NATURE OF SUIT

ACTIONS UNDER STATUTES

CONTRACT		TORTS		FORFEITURE/PENALTY		BANKRUPTCY		OTHER STATUTES	
[] 110 INSURANCE	[] 310 AIRPLANE	[] 362 PERSONAL INJURY -	[] 610 AGRICULTURE	[] 422 APPEAL	[] 400 STATE				
[] 120 MARINE	[] 315 AIRPLANE PRODUCT	[] 365 PERSONAL INJURY	[] 620 FOOD & DRUG	28 USC 158	[] 410 ANTI-TRUST				
[] 130 MILLER ACT	LIABILITY	[] 368 ASBESTOS PERSONAL	[] 625 DRUG RELATED	[] 423 WITHDRAWAL	[] 430 BANKS & BANKING				
[] 140 NEGOTIABLE	[] 320 ASSAULT, LIBEL &	INJURY PRODUCT	SEIZURE OF	28 USC 157	[] 450 COMMERCE/CC				
INSTRUMENT	SLANDER	LIABILITY	PROPERTY		RATES/ETC				
[] 150 RECOVERY OF	[] 330 FEDERAL	[] 370 OTHER FRAUD	21 USC 881		[] 460 DEPORTATION				
OVERPAYMENT &	EMPLOYERS'	[] 371 TRUTH IN LENDING	[] 630 LIQUOR LAWS		[] 470 RACKETEER INFLU-				
ENFORCEMENT OF	LIABILITY	[] 380 OTHER PERSONAL	[] 640 RR & TRUCK		ENCED & CORRUPT				
JUDGMENT	[] 340 MARINE	PROPERTY DAMAGE	[] 650 AIRLINE REGS		ORGANIZATION ACT				
[] 151 MEDICARE ACT	[] 345 MARINE PRODUCT	PRODUCT LIABILITY	[] 660 OCCUPATIONAL		(RICO)				
[] 152 RECOVERY OF	LIABILITY	PROPERTY DAMAGE	[] 690 OTHER		[] 480 CONSUMER CREDIT				
DEFAULTED	[] 350 MOTOR VEHICLE	PRODUCT LIABILITY			[] 490 CABLE/SATELLITE TV				
STUDENT LOANS	[] 355 MOTOR VEHICLE	PRODUCT LIABILITY			[] 810 SELECTIVE SERVICE				
(EXCL VETERANS)	PRODUCT LIABILITY	PRODUCT LIABILITY			[] 850 SECURITIES/				
[] 153 RECOVERY OF	[] 360 OTHER PERSONAL	PRODUCT LIABILITY			COMMODITIES/				
OVERPAYMENT OF	INJURY	PRODUCT LIABILITY			EXCHANGE				
VETERANS BENEFITS					[] 875 CUSTOMER				
[] 160 STOCKHOLDERS SUITS					CHALLENGE				
[] 190 OTHER CONTRACT					12 USC 3410				
[] 195 CONTRACT PRODUCT					[] 891 AGRICULTURE ACTS				
LIABILITY					[] 892 ECONOMIC				
[] 196 FRANCHISE					STABILIZATION ACT				
					[] 893 ENVIRONMENTAL				
					MATTERS				
					[] 894 ENERGY				
					ALLOCATION ACT				
					[] 895 FREEDOM OF				
					INFORMATION ACT				
					[] 900 APPEAL OF FEE				
					DETERMINATION				
					UNDER EQUAL ACCESS				
					TO JUSTICE				
					[] 950 CONSTITUTIONALITY				
					OF STATE STATUTES				
					[] 890 OTHER STATUTORY				
					ACTIONS				

Check if demanded in complaint:

CHECK IF THIS IS A CLASS ACTION
UNDER F.R.C.P. 23DO YOU CLAIM THIS CASE IS RELATED TO A CIVIL CASE NOW PENDING IN S.D.N.Y.?
IF SO, STATE:

DEMAND \$ OTHER JUDGE DOCKET NUMBER

Check YES only if demanded in complaint

JURY DEMAND: ☒ YES ☐ NO

NOTE: Please submit at the time of filing an explanation of why cases are deemed related.

(SEE REVERSE)

(PLACE AN X IN ONE BOX ONLY)

ORIGIN

☒ 1 Original Proceeding ☐ 2a. Removed from State Court ☐ 3 Remanded from Appellate Court ☐ 4 Reinstated or Reopened ☐ 5 Transferred from (Specify District) ☐ 6 Multidistrict Litigation ☐ 7 Appeal to District Judge from Magistrate Judge Judgment

☐ 2b. Removed from State Court AND at least one party is a pro se litigant

(PLACE AN X IN ONE BOX ONLY)

BASIS OF JURISDICTION

☐ 1 U.S. PLAINTIFF ☐ 2 U.S. DEFENDANT ☒ 3 FEDERAL QUESTION (U.S. NOT A PARTY) ☐ 4 DIVERSITY

IF DIVERSITY, INDICATE CITIZENSHIP BELOW. (28 USC 1332, 1441)

CITIZENSHIP OF PRINCIPAL PARTIES (FOR DIVERSITY CASES ONLY)

(Place an [X] in one box for Plaintiff and one box for Defendant)

CITIZEN OF THIS STATE	PTF DEF [] []	CITIZEN OR SUBJECT OF A FOREIGN COUNTRY	PTF DEF [] []	INCORPORATED and PRINCIPAL PLACE OF BUSINESS IN ANOTHER STATE	PTF DEF [] []
CITIZEN OF ANOTHER STATE	[] []	INCORPORATED or PRINCIPAL PLACE OF BUSINESS IN THIS STATE	[] []	FOREIGN NATION	[] []

PLAINTIFF(S) ADDRESS(ES) AND COUNTY(IES)

Upstate Correctional Facility
309 Barehill Road - P.O. Box 8001
Malone, N.Y. 12953

Franklin County

DEFENDANT(S) ADDRESS(ES) AND COUNTY(IES)

NYPD Precinct 88 - Kings County - 298 Classon Avenue, Brooklyn, N.Y. 11205
Detective Albert Brust - Kings County - 298 Classon Avenue, Brooklyn, N.Y. 11205
SDS Richa Erickson - Kings County - 298 Classon Avenue, Brooklyn, N.Y. 11205
Detective Anthony Barbee - Kings County - 298 Classon Avenue, Brooklyn, N.Y. 11205
NYPD Headquarters - New York County - 4 Police Plaza - New York, NY, 10001

DEFENDANT(S) ADDRESS UNKNOWN

REPRESENTATION IS HEREBY MADE THAT, AT THIS TIME, I HAVE BEEN UNABLE, WITH REASONABLE DILIGENCE, TO ASCERTAIN THE RESIDENCE ADDRESSES OF THE FOLLOWING DEFENDANTS:

Check one: THIS ACTION SHOULD BE ASSIGNED TO: ☐ WHITE PLAINS ☐ FOLEY SQUARE
(DO NOT check either box if this a PRISONER PETITION.)

DATE	SIGNATURE OF ATTORNEY OF RECORD	ADMITTED TO PRACTICE IN THIS DISTRICT [] NO [] YES (DATE ADMITTED Mo. _____ Yr. _____) Attorney Bar Code #
RECEIPT #		

Magistrate Judge is to be designated by the Clerk of the Court.

Magistrate Judge _____ is so Designated.

J Michael McMahon, Clerk of Court by _____ Deputy Clerk, DATED _____

UNITED STATES DISTRICT COURT (NEW YORK SOUTHERN)

AO 440 (Rev. 8/01) Summons in a Civil Action

RETURN OF SERVICE

Service of the Summons and complaint was made by me ⁽¹⁾	DATE
NAME OF SERVER (PRINT)	TITLE

Check one box below to indicate appropriate method of service

- ☐ Served personally upon the defendant. Place where served: _____
- ☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were left: _____
- ☐ Returned unexecuted: _____
- ☐ Other (specify): _____

STATEMENT OF SERVICE FEES

TRAVEL	SERVICES	TOTAL
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DECLARATION OF SERVER

I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.

Executed on _____
Date

Shaquille Dinkins - Pro Se
Signature of Server

Upstate Correc. Fac. 309 Bore Hill Rd. Malone, N.Y. 12953
Address of Server

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Procedure.

The following sections describe the elements that must be included in a properly drafted complaint. These elements should appear in your complaint in the order listed below. You should use these instructions along with the specific or general complaint form included in this manual.

Contents of the Complaint

Caption

The first page of your complaint must begin with a caption. The top of the caption should state the name of the court in which the action is being filed, that is, the United States District Court for the Southern District of New York, followed by the names of all plaintiffs and defendants.

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

X

Your name

Shagunil Dinkins

Plaintiff,

COMPLAINT

-against-

Jury Trial Yes ☒ No ☐

Names of all people or organizations you are suing.

Detective Albert Brust Shield # 1001,

Detective Anthony Barboe Defendants.
Shield # 104

SOS Ricka Erickson. NYPD/88th Precinct

In the event that you do not know the name of any defendant, you may refer to that defendant as John Doe or Jane Doe, giving his or her position and, if known, the place and time that the incident occurred, and as much other information as will help to identify who the person is. For example, if the defendant is a prison correction officer, he may be identified in the complaint as "Correction Officer John Doe who was on duty at Green Haven Correctional Facility in A Block at 8:00 p.m. on January 6, 2007." Although John Doe's real identity will need to be determined in order to serve the

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UPSTATE CORRECTIONAL FACILITY
P.O. BOX 2000, 399 BARRELL ROAD
MALONE, NEW YORK 12953

United States District Court
Southern District of New York
Daniel Patrick May/07/08
United States Court House
500 Pearl Street
New York, New York, 10007
PM 54

U.S. MAIL
SDNY

Upstate
Correctional Facility

